

## Supplemental Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	COMPOSITIONS CONTAINING MACROPHAGES AND USES THEREOF
Attorney Docket Number::	0508-1125
Request for Early	No
Publication?::	
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	19
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent	No
Appl.?::	

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: BENEDICTE  
Middle Name::  
Family Name:: CHAZAUD  
Name Suffix::  
City of Residence:: PARIS  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 2, VILLA DE LA SAULAIE  
Address::  
City of Mailing Address:: PARIS  
State or Province of Mailing Address::  
Country of Mailing Address:: FRANCE  
Postal or Zip Code of Mailing Address:: F-75020

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: FRANCE  
Status:: Full Capacity  
Given Name:: ROMAIN  
Middle Name::  
Family Name:: GHERARDI  
Name Suffix::  
City of Residence:: BRUNOY  
State or Province of  
Residence::  
Country of Residence:: FRANCE  
Street of Mailing 17, ROUTE DE BRIE  
Address::  
City of Mailing Address:: BRUNOY

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-91800

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: LUC

Middle Name::

Family Name:: HITTINGER

Name Suffix::

City of Residence:: BOISSY SAINT LEGER

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 7, ALLEE DES VIGNES

Address::

City of Mailing Address:: BOISSY SAINT LEGER

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-94470

Applicant Authority Type:: Inventor

Primary Citizenship Country:: FRANCE

Status:: Full Capacity

Given Name:: EMMANUEL

Middle Name::

Family Name:: TEIGER

Name Suffix::

City of Residence:: PARIS

State or Province of

Residence::

Country of Residence:: FRANCE

Street of Mailing 138, BOULEVARD MENILMONTANT

Address::

City of Mailing Address:: PARIS

State or Province of Mailing Address::

Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-75020

### Correspondence Information

Correspondence Customer 00466

Number::

### Representative Information

Representative Customer	00466
Number::	

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	National Stage of	PCT/EP2004/007891	7/15/04
<u>PCT/EP2004/007891</u>	<u>C-I-P</u>	<u>PCT/EP03/07731</u>	<u>7/16/03</u>

### Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
INTERNATIONAL	PCT/EP03/07731	7/16/03	Yes

**Assignment Information**

Assignee Name::

Street of Mailing

Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::